Application Data Sheet

Application Information

Application number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	DYNAMIC WEATHER SIMULATION
Attorney Docket Number::	003797.00716
Request for Early Publication?::	NO
Request for Non-Publication?::	YES
Suggested Drawing Figure::	2
Total Drawing Sheets::	7
Small Entity?::	NO
Latin name::	
Variety denomination name::	
Petition included?::	NO
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	

NO

Secrecy Order in Parent Appl.?::

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Niniane
Middle Name::	
Family Name::	Wang
Name Suffix::	•
City of Residence::	Santa Clara
State or Province of Residence::	CA
Country of Residence::	USA
Street of mailing address::	2305 Monroe St. #8
City of mailing address::	Santa Clara
State or Province of mailing address::	CA
Country of mailing address::	USA
Postal or Zip Code of mailing address::	95050
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	

Country of mailing addr	ess::					
Postal or Zip Code of m	nailing address::					
Applicant Authority Typ Primary Citizenship Co		Invent	or			
Status::	•	Full Ca	apacity			
Given Name::						
Middle Name::						
Family Name::						
Name Suffix::)		
City of Residence::						
State or Province of Re	sidence::					
Country of Residence::						
Street of mailing address	ss::					
City of mailing address: State or Province of ma Country of mailing addr Postal or Zip Code of m	ailing address:: ress::					
Correspondence In	nformation					
Correspondence Customer Number:: 28319						
Representative Info	ormation					
Representative Customer Number:: 28319						
Domestic Priority I	nformation					
Application::	Continuity Type	••	Parent Application::	Parent Filing Date::		
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Foreign Priority Information					
Country::	Application number::	Filing Date::	Priority Claimed::		

Assignee Information

Assignee name::

Microsoft Corporation

Street of mailing address::

One Microsoft Way

City of mailing address::

Redmond

State or Province of mailing address::

WA

Country of mailing address::

USA

Postal or Zip Code of mailing address::

98052